

LATEST #9

**FORMS REQUIRES: FORM 1040A, SCH2, FORM 8888, FORM 8880, FORM 8812, IT540, SCH E, 2008
LA REFUNDABLE CHILD CARE CREDIT WORKSHEET, 10610**

INFORMATION RETURNS ATTACHED: FORM W-2

OTHER: DIRECT DEPOSIT

THIRD PARTY DESIGNEE:

NAME: JOHN DOE

PHONE: 888-555-1111

PIN: 11112

PREPARED BY: TAXPAYER

NAME: THELMA LOUISE BAKER

SSN: 400-00-4311

DOB: 1/1/1941

OCCUPATION: CONSULTANT

DISABLED: NO

PRES ELEC FUND: YES

DAYTIME PHONE: NOT GIVEN

ADDRESS: 10000 BACONLAND DR APT 16

BATON ROUGE LA 70807

FILING STATUS: HEAD OF HOUSEHOLD

LINE 6D: 2

DEPENDENT INFORMATION:

CHILD TAX

NAME	DOB	AGE	SSN	RELATIONSHIP	#MO	CREDIT
ORLANDO BYRD	041503	5	400-55-3011	GRANDSON	12	X

LA

AMENDED RETURN

SOCIAL SECURITY BENEFITS 5026

IRA CONTRIBUTIONS 2345

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SCHEDULE 2:

PART I:

LINE 1:

	(A)	(B)	(C)	(D)
CHILDREN PALACE	900	LITTLE RIVER	BATON ROUGE LA 70804	72-6789000 2494

STAR RATING 2

PART II:

LINE 2:	(A)	(B)	(C)
	ORLANDO BYRD	400-55-3011	2494

LINE 3: 2494

SCHEDULE EIC

NAME ON RETURN **THELMA L BAKER**

SSN **400-00-4311**

LINE 1: CHILD'S NAME **ORLANDO BYRD**

LINE 2: CHILD'S SSN **400-55-3011**

LINE 3: CHILD'S YEAR OF BIRTH **2003**

LINE 5: CHILD'S RELATIONSHIP TO YOU **GRANDSON**

LINE 5: NUMBER OF MONTHS LIVED WITH YOU **12**

FORM 8888

LA DIRECT DEPOSIT (PLEASE INPUT A RTN AND ACCOUNT NUMBER THAT WILL WORK FOR YOU)

NAME OF INSTITUTION: SAVINGS CREDIT 348

RTN: 000678999

ACCT#: 66557700

TYPE OF ACCOUNT: CHECKING

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FORM 8880

THELMA BAKER

400004311

LINE 1	2345
LINE 3	2345
LINE 5	2345
LINE 6	2000
LINE 7	2000
LINE 8	24992
LINE 9	.2
LINE 10	400
LINE 11	863
LINE 12	748
LINE 13	115
LINE 14	115

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FORM 8812

NAME

THELMA L BAKER

SSN

400-00-4311

PART I

LINE 1:

1000

LINE 2:

0

LINE 3:

1000

LINE 4A:

26502

LINE 5: YES

18002

LINE 6:

2700

LINE 13:

1000

SCHEDULE OF AD VALOREM TAX CREDIT INCORMATION

PARISH

EAST BATON ROUGE

ASSESSMENT NUMBER

12365478

TOTAL ASSESSMENT

1156

INVENTORY ASESSMENT

659

RATIO

57.01%

TOTAL ASSESSED TAX PAID

86.00

QUALIFIED INVENTORY TAX

49.00

CHECK NUMBER

123

CHECK DATE

12/30/08

CHECK AMOUNT

86.00

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FORM W-2

BOX A: EMPLOYEE'S SOCIAL SECURITY NUMBER	400-00-4311
BOX B: EMPLOYERS IDENTIFICATION NUMBER	02-9876543
BOX C: EMPLOYER'S NAME ADDRESS AND ZIP CODE	LAST JOB INC 97 WHEATLEY AVE BALTIMORE MD 21230
BOX E: EMPLOYEE'S FIRST NAME INITIAL LAST NAME	THELMA L BAKER
BOX F: EMPLOYEE'S ADDRESS AND ZIP CODE	10000 BACONLAND DR APT 16 BATON ROUGE LA 70807
BOX 1: WAGES, TIPS, OTHER COMPENSATION	26502
BOX 2: FEDERAL INCOME TAX WITHHELD	445
BOX 3: SOCIAL SECURITY WAGES	26502
BOX 4: SOCIAL SECURITY TAX WITHHELD	1705
BOX 5: MEDICARE WAGES AND TIPS	26502
BOX 6: MEDICARE TAX WITHHELD	399
BOX 15: STATE	LA
EMPLOYER'S STATE ID NUMBER	237895001
BOX 16: STATE WAGES, TIPS, ETC	26502
BOX 17: STATE INCOME TAX	215

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FORMS INCLUDED: FORM 1040A, FORM W-2

FORM 1040A:

TAXPAYER'S FIRST NAME, INITIAL, LAST NAME

THELMA L BAKER

TAXPAYER'S SOCIAL SECURITY NUMBER

400-00-4311

HOME ADDRESS

10000 BACONLAND DR APT #16

CITY STATE & ZIP

BATON ROUGE LA 70807

TAXPAYER'S PRESIDENTIAL ELECTION CAPAIGN FUND

YES

FILING STATUS

HEAD OF HOUSEHOLD

LINE 6A: YOURSELF (EXEMPTION)

X

NUMBER OF BOXES CHECKED ON 6A & 6B

1

LINE 6C: DEPENDENT #1:

NAME

ORLANDO BYRD

SOSIAL SECURITY NUMBER

400-55-3011

RELATIONSHIP

GRANDSON

QUALIFYING CHILD

X

NUMBER OF CHILDREN WHO LIVED WITH YOU

1

LINE 6D: TOTAL NUMBER OF EXEMPTIONS CLAIMED

2

LINE 7: WAGES SALARIES TIPS

26502

LINE 14A: SOCIAL SECURITY BENEFITS

5026

LINE 14B: TAXABLE AMOUNT

835

LINE 15: TOTAL INCOME

27337

LINE 17: IRA DEDUCTION

2345

LINE 20: TOTAL ADJUSTMENTS

2345

LINE 21: ADJUSTED GROSS INCOME

24992

LINE 22: AGI

24992

LINE 23A: YOU

X

1

LINE 24: STANDARD DEDUCTION	9350
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LINE 25: SUBTRACT	15642
LINE 26:	7000
LINE 27: TAXABLE INCOME	8642
LINE 28: TAX	863
LINE 29: CREDIT FOR CHILD AND DEPENDENT CARE EXPENSE	748
LINE 32: CHILD TAX CREDIT	115
LINE 34: TOTAL CREDITS	863
LINE 38: FEDERAL INCOME TAX WITHHELD	445
LINE 40A: EARNED INCOME CREDIT	1194
LINE 41; ADDITIONAL	1000
LINE 43: TOTAL PAYMENTS	2639
LINE 44: OVERPAYMENT	2639
LINE 45A: REFUND	2639

LATEST #9

IT540

FIRST NAME INITIAL LAST NAME

THELMA L BAKER

SSN

400-00-4311

ADDRESS

10000 BACONLAND DR APT 16

CITY STATE ZIP

BATON ROUGE LA 70807

AMENDED

X

FILING STATUS

HEAD OF HOUSEHOLD

LINE 6: EXEMPTIONS

LINE 6A: YOURSELF

X

65 OR OLDER

X

TOTAL OF 6A & 6B:

2

LINE 6C: DEPENDENTS

1

FIRST NAME

LAST NAME

SSN

RELATIONSHIP

BIRTH DATE

ORLANDO

BYRD

400-55-3011

GRANDSON

04/15/2003

LINE 6D: TOTAL EXEMPTIONS

3

LINE 7: FEDERAL AGI

SCHEDULE E

X

24157

LINE 10: LA TAX TABLE INCOME

24157

LINE 11: LA INCOME TAX

495

LINE 13: EDUCATION CREDIT

25

LINE 15: TOTAL

25

LINE 16: ADJUSTED LA INCOME TAX

470

LINE 18: TOTAL INCOME TAX

470

LINE 19: 2008 LA REFUND CHILD CARE

374

LINE 19A:

2494

LINE 19B:

2494

LINE 20: 2008 LA READINESS CHILD CARE CREDIT

187

LINE 21: EARNED INCOME CREDIT

42

LINE 25: LA TAX WITHHELD	215
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LINE 30: TOTAL	818
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LINE 31: OVERPAYMENT	348
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LINE 33: OVERPAYMENT	348
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LINE 41: SUBTOTAL	348
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LINE 43: REFUND	348
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SCHEDULE E

LINE 1: FEDERAL AGI	24992
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LINE 3: TOTAL	24992
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LINE 4A: TAXABLE SOCIAL SECURITY	07E	835
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LINE 4I: EXEMPT INCOME	835
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LINE 4K: EXEMPT INCOME	835
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LINE 5A: LA AGI BEFORE IRC 280(C)	24157
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LINE 5C: LA AGI	24157
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